



CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

RECEIVED
STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
FEB 09 2012

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COVER PAGE

GATHY BARLING ALLEN, COUNTY CLERK
BY: [Signature]
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E-Filed on:

02/08/12 11:43:05

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Moty, Leonard Francis

1. Office, Agency, or Court

Agency Name

County of Shasta

Division, Board, Department, District, if applicable

Your Position

Board of Supervisors

Supervisor District 2

► If filing for multiple positions, list below or on an attachment.

Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS

Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☒ County of Shasta

☐ City of _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2011, through December 31, 2011

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

☒ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is

I certify under penalty of perjury under the laws of the State of California that

Date Signed 02/08/2012
(month, day, year)

Signature

Section 1 Additional Agency(ies)/Position(s) for Moty, Leonard Francis:

| Agency | Position |
|--|------------------------------|
| Airport Land Use Commission | Commissioner (Alternate) |
| Indian Gaming Local Comm Benefit Committee | Committee Member (Alternate) |
| Regional Transportation Planning Agency | Director |
| N Sac Valley Integrated Reg Water Mgt Bd | Director |
| Sierra-Sacramento Valley EMS Board | Director |
| Regional Council of Rural Counties | Alternate Delegate |

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Moty, Leonard Francis

▶ NAME OF BUSINESS ENTITY

Bank of Commerce Holdings

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Banking Services

FAIR MARKET VALUE

☐ \$2,000 - \$10,000☒ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock☐ Other

(Describe)

☐ Partnership☐ Income Received of \$0 - \$499☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/____

ACQUIRED

____/____/____

DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

☐ \$2,000 - \$10,000☐ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock☐ Other

(Describe)

☐ Partnership☐ Income Received of \$0 - \$499☐ Income Received of \$500 or More (Report on Schedule C)

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ACQUIRED

____/____/____

DISPOSED

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GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

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IF APPLICABLE, LIST DATE:

____/____/____

ACQUIRED

____/____/____

DISPOSED

Comments:

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Moty, Leonard Francis

► NAME OF SOURCE

Simpson University

ADDRESS (Business Address Acceptable)

2211 College View Drive

Redding CA 96003

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Higher Education

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------------|-------------------------------|
| <u>10/28/11</u> | <u>\$ 75.00</u> | <u>Golf Tourney Entry Fee</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

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|-----------------|-----------|------------------------|
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
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| <u> / / </u> | <u>\$</u> | <u> </u> |
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Comments: _____